

FILED
APR 28 2008
RICHARD W. WIEKING
CLERK U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

E-filing

SI

(PR)

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Marlon Estacio Pagtakhan }
(ETAL "derivative" victims) }
Plaintiff, }

CV 08

2188

CASE NO. _____

vs. detective John Doe, Burlingame
Police Department, Chief Deputy D.A. Steve
Waystafte ETAL, Eric M. Hale, Jatinder
K Singh, Thomas M. Samuels, Jack
Grandsaert, County of Defendant.
San Mateo

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, Marlon Pagtakhan, declare, under penalty of perjury that I am the
plaintiff in the above entitled case and that the information I offer throughout this application
is true and correct. I offer this application in support of my request to proceed without being
required to prepay the full amount of fees, costs or give security. I state that because of my
poverty I am unable to pay the costs of this action or give security, and that I believe that I am
entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the
name and address of your employer:

Gross: n/a Net: n/a

Employer: n/a

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 Celtic Moving & Storage, 18/hour "\$2,880
 5 potential" before my arrest on 8/11/07
 6 _____

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ☒ No _____
 10 self employment

11 b. Income from stocks, bonds, Yes _____ No ☒
 12 or royalties?

13 c. Rent payments? Yes _____ No ☒

14 d. Pensions, annuities, or Yes _____ No ☒
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes _____ No ☒
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 employment ranging from \$1,500-2,500/month
 22 4 months prior to arrest on 8/11/07
 23 _____

23 3. Are you married? Yes _____ No ☒

24 Spouse's Full Name: n/a

25 Spouse's Place of Employment: n/a

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ Ø Net \$ Ø

28 4. a. List amount you contribute to your spouse's support: \$ Ø

b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

mother who I financially aided in the amount of \$500.00 before my arrest.

5. Do you own or are you buying a home? Yes ___ No ☒

Estimated Market Value: \$ ☒ Amount of Mortgage: \$ ☒

6. Do you own an automobile? Yes ___ No ☒

Make n/a Year n/a Model n/a

Is it financed? ☒ Yes ___ No ___ If so, Total due: \$ ☒

Monthly Payment: \$ ☒

7. Do you have a bank account? Yes ___ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: n/a

Present balance(s): \$ ☒

Do you own any cash? Yes ☒ No ___ Amount: \$ 4.00 (pocket money)

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ☒ No ___

household for a studio, sister is paying for my storage unit
(.60/per pound)

8. What are your monthly expenses?

Rent: \$ ☒ Utilities: ☒

Food: \$ 10/month extra food Clothing: ☒

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
	\$	\$
	\$	\$
	\$	\$

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

yes / amount unknown (cards used when I was a teen)

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ☒ No ☐

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

habeas corpus C-07-6884 SI(pr) US Distric Court

habeas corpus HC1973 Superior, County of San Mateo
(also pending in Court of Appeals)

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

April 14th, 2008

DATE

Marlon Z. Paglatian

SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Marlon Pagtakhan for the last six months

Napa State Hospital ^[prisoner name] where ~~he~~ she is confined.
_[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 12.50 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 12.50.

Dated: 4-14-08

Amy Davis MSW
[Authorized officer of the institution]

**CONFIDENTIAL PATIENT INFORMATION - CALIFORNIA WELFARE AND INSTITUTIONS CODE
 SECTIONS 5328 & 4514. INFORMATION SUBJECT TO RELEASE IN ACCORDANCE WITH THE
 FEDERAL PRIVACY ACT OF 1974 (PUBLIC LAW 93-579).**

4/14/2008

NAPA STATE HOSPITAL

Page 1 of 1

10:45:26AM

TRUST ACCOUNT / CASHIERS' SYSTEM II

Patient Ledger Report

2074227 PAGTAKHAN, MARLON

	TransDate	Doc No.	Item	Comment	Withdrawl	Deposit	Balance
1	03/07/2008	18-075699	AB1013 Funds	\$12.50 Receipts		\$12.50	\$12.50
2	03/13/2008	13-155409	Cash Disbursement	Cashlist V-702	\$12.50		\$0.00
3	04/06/2008	18-075802	AB1013 Funds	\$12.50 Receipts		\$12.50	\$12.50
4	04/10/2008	13-155619	Cash Disbursement	cl v780	\$12.50		\$0.00

TOTAL WITHDRAWALS / DEPOSITS:

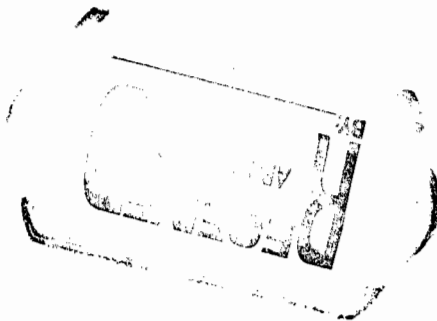
\$25.00

\$25.00

FR: MARLON E. PAGIAKHAN # 2074227
NAPA STATE HOSPITAL B1, B2
2100 NAPA VALLEJO HWY
NAPA, CA 94558-6293



OFFICE OF THE CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
450 GOLDEN GATE AVENUE
SAN FRANCISCO, CALIFORNIA 94102



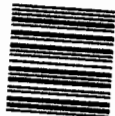
Handwritten signature and date:
4/28/08
P. E. P.



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